

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

07/15/96

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NJD981075443

FACILITY NAME -> PHOENIX COLOR GRAPHICS

MAILING ADDRESS -> 1300 METROPOLITAN AVE WEST DEPTFORD, NJ 08066

INSTALLATION ADDRESS -> 551 MIDATLANTIC PKWY WEST DEPTFORD, NJ 08066

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY **REGION II** 290 BROADWAY NEW YORK, NEW YORK 10007-1866

ATTN: AIR & WASTE MANAGEMENT DIVISION, 22ND FL. HAZARDOUS & SOLID WASTE PROGRAMS BRANCH RCRA NOTIFICATIONS

PORRECA, NICHOLAS J TO: PREPRESS DEPT PHOENIX COLOR GRAPHICS 1300 METROPOLITAN AVE WEST DEPTFORD, NJ 08066

Please	print	or	type	with	ELITE	
				The Real Property lies		

Please relet to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act.



Notification of Regulated Waste Activity

Date Received (For Official Use Only)

and Recovery Act). United States Environmental Protection Agency	عر
L Installation's EPA ID Number (Mark X' in the appropriate box)	whit!
A. First Notification B. Subsequent Notification C. Installation's EPA ID Number	\neg
(Complete tell 6)	
IL Name of Installation (Include company and specific site name)	
PHOENIX COLOR GRAPHICS	-
III. Location of Installation Requires Building Number or Latitude and Longitude for processing.	-
Street Annual Manager (1971)	
551 M. 1. DATLANTIC PARKWAY	
Street (Continued)	-
City of Town State Zip Code	
WESTIDEPTFORD NF08066	
County Name	
015 G10 v c e s t e R	
IV. Installation Mailing Address	and i
Street or P.O. Box	
1300 METROPOLITAIN AVE	
City or Town State Zip Code	2.08 124
WEST DEPITEORD NJ08066	
V. Installation Contact (Person to be contacted regarding waste activities at site)	1
Name (Last)	R\$37.5
PORRECA IIIINICHALIACITU	
Job Title Phone Number (Area Code and Number)	_
PREPRESS DEPIT 1 609-845-6666 183291	6
VI. Installation Contact Address	400
A Contract Address Location Mailing Other B. Street or P.O. Box	tree.
Cuy or i own	
VII. Ownership	
A Name of Installation's Legal Owner	
APT IND/APTS REAL/HOVIENC DREEP	1
Street, P.O. Box, of Route Number MAN AGE MENT CORP	L:=:
6150 PARK AVE SUITE ZIO	Т
City or Town State Zip Code	
	_
B. Land Type C. Owner Type D. Change of Owner (Date Changed)	ar

From: Jack Hoyt, AWMD, EPA, Region 2, 290 Broadway, 22 Fl. New York, NY 10007-1866. Tel; (212) 637 4106

for each on or stepulated. Each had the		ID - FOR	Official U	se Only	
Warro Activity				100	
VIII. Type of Regulated Waste Activity (Mark X' in the appropriate boxes; Res	fer to instruc	1943		跨	號
A. Hazardous Waste Activity	edt is 7	B. Use	d Oil Recyc	ing Activitie	es
1. Generator (See instructions) a. Greater than 1000kg/mo (2,200 lbs.) b. 100 to 1000 kg/mo (200-2,200 lbs.) c. Less than 100 kg/mo (220 lbs) 2. Transporter (Indicate Mode. In boxes 1-5 below) a. For own waste only b. For commercial purposes Mode of Transportation 1. Air 2. Rail 3. Treater, Storer, Disposer installation) Note: A permited for this activity; instructions. Hazardous Waste Fuel a. Generator Marketing to b. Other Marketers conductive indicaters conductive instructions. 1. Smelter Deferral 2. Small Quantity Explicate Type of Combustive instructions. 1. Smelter Deferral 2. Small Quantity Explicate Type of Combustive instructions. 1. Utility Boiler 2. Industrial Boiler 3. Industrial Furnace Underground Injection Comparison	nit is see o Bumer I Fumace kemption stion	a. Marke Oil to b. Marke Oil M 2. Used C Combu a. Utility b. Indus c. Indus c. Indus d. Trai b. Trai b. Trai b. Tray 4. Used C	trial Boiler trial Furnace II Transport ity(ies) nsporter nsfer Facility II Processor of Activity(i	Shipment of cation Burnist Claims the cifications indicate Types) er - Indicate T/Re-refiner	er he be(s)
5. Onderground injection C	January 1	a. Proce b. Re-re	iss fine		
IX. Description of Hazardous Wastes (Use additional sheets if necessary)		. 2			***
A. Characteristics of Nonlisted Hazardous Wastes. (Mark X' in the boxes corre	esponding to	the charac	teristics of n	onlisted	STATE
C. Other Wastes. (State or other wastes requiring a handler to have an I.D. nur		5 11 structions.)		6 12 6	
X. Certification			Market Care		O.S.
I certify under penalty of law that this document and all attachments were prepared under nassure that qualified personnel properly gather and evaluate the information submitted. Based those persons directly responsible for gathering the information, the information submitted is, I am aware that there are significant penalties for submitting false information, including the	on my inquiry to the best of m	of the person wknowledge:	or persons wit and belief; trué	o manage the	e sy:
Signature ORIGINAL ANLY Name and Official Title (Type Nicholas J Perrec	- PR	E PRES	5 -	e Signed	/
XI. Comments					
ONE TIME CLEAN UP	- 4. 847			. r 401	3
704611	LT 94			18	1
Note: Mail completed form to the appropriate EPA Regional or State Office. (S	on Section	Il of the ho	oldet for edd	mecae I	70



Other

RCRIS NOTIFICATION DATA DISCREPANCY FORM

	ion from RCRIS			New Info	mation	l-make at	e to "E" record only
Facility Name: <u>SRA</u>	UN PRINTING COM	DANII	F	acility Name:	mation	(make change	e to "E" record only
Facility EPA ID Number	er: NJD981075443	3		acility Name:	_		
acility Address:	1 MID ATLANTIC 1	Kw'y	F	acility EPA ID Number: acility Address:			
City: WES	ST DEPTHOODSt: NJ Zip:_	0		City:			
lalling Address:			V	failing Address:			c.h
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Facility Name	EPA ID Number	<u> </u>	Ľ	•	C		
Facility Address	Mailing Address		1	conditionally exempt Small Quantity Generator		6 No longer Ge	enerates HW;
Facility Contact	Phone			Definitionally Excluded Wastes	\times	Still in Busin 7 No longer Ge	nerates HW;
SIC Code(s)	Waste Code(s)			Delisted Wastes		8 Never General	ices ited Hazardous Wast
	waste code(s)		4	One-time Hazardous Waste Generator		ID Number to	Transport

Joel Golumbek, Chief, NJCS

Periodic Hazardous Waste Generator

Non-Hazardous Waste

Regulated Under Another ID 0 Number(s) (list below)

CONTINUE ON REVERSE

EPA Form 8700-12 (6-80)

SEPA NOTIF	U.S. ENVIRONMENTAL PROTECTION AGENCY ICATION OF HAZARDOUS WASTE ACTIVITY	INSTRUCTIONS: If you received a preprinted
INSTALLA- TION'S EPA I.D. NO.	AGENCY, REGION	label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information
I. STALLATION	1985 HAR 28 MM 2: 07	in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted
INSTALLA- TION II. MAILING ADDRESS	PLEASE PERMIS ADMINISTRATION PLEASE PERMIS ADMINISTRATION THIS SPACE	label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a trans-
LOCATION IIL OF INSTAL- LATION		porter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).
FOR OFFICIAL USE ONLY		AND PROPERTY OF PARTY OF PARTY OF PARTY.
o C	COMMENTS	
15 16 INSTALLATION'S EPA I.E	D. NUMBER APPROVED DATE RECEIVED (yr., mo., & day)	55
FNJD981075	443 1	
I. NAME OF INSTALLATIO	13 14 15 16 17 22 N	
CMP Printing		67
II. INSTALLATION MAILIN	G ADDRESS STREET OR P.O. BOX	
3B 0 X 33 8		
15 16	CITY OR TOWN ST. ZIP	CODE
4Thorofa,re	N J 0 80	86
III. LOCATION OF INSTAL	LATION 40 41 42 47	- 51
5 M 1d A tla n	tic Parkway	A U NO WAY AND A WAY
15 16		CODE Gloucester 08 6 015
6 West Dept	h fo r d N J 8	08 6 015
IV. INSTALLATION CONTA	40 41 42 47	• 51
CT a 5 TILL	ME AND TITLE (last, first, & job title)	PHONE NO. (area code & no.)
2 L ew A s W i L	lian Plan t Manage r	6 0 9 84 8 0 0 91
V. OWNERSHIP	A. NAME OF INSTALLATION'S LEGAL OWNER	对位的时间是对对自己是一种时间
c 8 R ee C A S S O		
B. TYPE OF OWNERSHIP (enter the appropriate letter into	box) VI. TYPE OF HAZARDOUS WASTE ACTIVITY (er	nter "X" in the appropriate box(es))
F = FEDERAL 30 = NON-FEDERAL	The street of th	FRANSPORTATION (complete item VII) UNDERGROUND INJECTION
VII. MODE OF TRANSPORT	TATION (transporters only – enter "X" in the appropriate b	hox(es))
A. AIR B. RAI	L C. HIGHWAY D. WATER E. OTHER	(specify):
VIII. FIRST OR SUBSEQUE	NT NOTIFICATION to indicate whether this is your installation's first notification of haz	ardous wasta activity or a subsequent positiontion
VIII. FIRST OR SUBSEQUE	63 64 65	ardous wasta activity or a subsequent positiontion
VIII. FIRST OR SUBSEQUE	NT NOTIFICATION to indicate whether this is your installation's first notification of haz in, enter your Installation's EPA I.D. Number in the space provided be	ardous waste activity or a subsequent notification. elow. C. INSTALLATION'S EPA I.D. NO.

				I.D FOR OF	FICIAL USE ONLY
				W	T/A C 1
IX. DESCRIPTION OF HA	AZARDOUS WAST	ES (continued from	front)	WALLEY DOWN	13 14 18 (1 + Vo) (1 + V) (1 + V)
A. HAZARDOUS WASTES FF waste from non-specific so	ROM NON-SPECIFIC	C SOURCES. Enter the	four-digit number from	40 CFR Part 261.31 fo	r each listed hazardous
Lil	2	3	4874	5	6
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
 B. HAZARDOUS WASTES FF specific industrial sources year 				R Part 261.32 for each	listed hazardous waste from
13	14	15	16	17	18
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
C. COMMERCIAL CHEMICA stance your installation han	ndles which may be a l	hazardous waste. Use ad	ditional sheets if necessa	ry.	33 for each chemical sub-
31	32	33	34	35	36
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	TT			TT	
D. LISTED INFECTIOUS WA	STES Enter the four	r-digit number from 40	CFR Part 261.34 for eac	ch listed hazardous wast	e from hospitals, veterinary
hospitals, medical and resea	arch laboratories your	installation handles. Us	e additional sheets if neo	essary.	
49	50	51	52	53	54
E. CHARACTERISTICS OF N	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
hazardous wastes your insta				sponding to the charact	ensites of fion—instea
1. IGNITABL (D001)		2. CORROSIVE	[]3. REAC	TIVE	▲ 4. TOXIC (D000)
X. CERTIFICATION	SEE SEARCE .		HERENE SHEET, E.S.		VERSELE MARKET
I certify under penalty attached documents, and I believe that the submit mitting false information,	I that based on my ted information is	inquiry of those ind true, accurate, and o	lividuals immediately complete. I am aware	responsible for obto	nining the information,
BIGNATURE	2/		FICIAL TITLE (type or)	orint)	DATE SIGNED
Welleam &	Lewis		+ MANAGRA		3/19/85

Pellean Lewis
EPA Form 8700-12 (6-80) REVERSE



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

12/07/92

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EPA I.D. NUMBER ->

NJD981075443

FACILITY NAME -> BROWN PRINTING CO

MAILING ADDRESS -> 551 MID ATLANTIC PKWY WEST DEPTFORD, NJ 08086

INSTALLATION ADDRESS ->

551 MID ATLANTIC PKWY WEST DEPTFORD, NJ 08086

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY **REGION II 26 FEDERAL PLAZA NEW YORK, NEW YORK 10278**

ATTN: PERMITS ADMINISTRATION BRANCH, ROOM 505

TO: BORDEN, KEVIN PLT TECH DIR BROWN PRINTING CO 668 GRAVEL PIKE EAST GREENVILLE, PA 18041-9632



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

12/21/92

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER ->

NJD981075443

FACILITY NAME -> BROWN PRINTING CO

MAILING ADDRESS -> 551 MID ATLANTIC PKWY WEST DEPTFORD, NJ 08086

INSTALLATION ADDRESS ->

551 MID ATLANTIC PKWY WEST DEPTFORD, NJ 08086

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY **REGION II** 26 FEDERAL PLAZA **NEW YORK, NEW YORK 10278**

ATTN: AIR & WASTE MANAGEMENT DIVISION, ROOM 1006 HAZARDOUS & SOLID WASTE PROGRAMS BRANCH RCRA NOTIFICATIONS

TO: BORDEN, KEVIN PLT TECH DIR BROWN PRINTING CO 668 GRAVEL PIKE EAST GREENVILLE, PA 18041-9632

A *** - 1 *** *** *** ***

BROWN PRINTING COMPANY

A GRUNER + JAHR COMPANY

EAST GREENVILLE DIVISION

ROUTE 29 RD 1 • EAST GREENVILLE, PENNSYLVANIA 18041 • PHONE 215-679-4451

November 11, 1992

U.S. EPA Region II Permits Administration Branch 26 Federal Plaza, Room 505 New York, NY 10278

Attention: Waste Management Division.

Enclosed is a completed Notification of Regulated Waste Activity form. This form is being filed to notify of a change in the name and ownership of the former CMP Printing Company of Thorofare, New Jersey. If you have any questions concerning this matter, I can be reached at the above address.

Sincerely,

Bill Booth

Environmental Coordinator

cc: NJDEP w/encl.

K. Larson, BPC w/encl.

K. Borden, BPC w/encl.

D. Robinson, BPC w/encl.

L. Dillion, BPC w/encl.

Pleasa print or type with ELITE type (12 characters per inch) in the unshaded areas only

GSANO 0245 FPA OT

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

Notification of Regulated Waste Activity Division Agency

Date Received (For Official Use Only)

NOV 1 9 1992

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III. Lo	catio	n of	Install	tion	(Phy	sica	ado	dress	s not	P.0	. Bo	ox or	Rou	te N	umb	er)											
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	ID - For Official Use Only
The Steel Water Company	
/III. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to	instructions.)
A. Hazardous Waste Activity	B. Used Oil Fuel Activities
1. Generator (See Instructions) a. Greater than 1000kg/mo (2,200 lbs.) b. 100 to 1000 kg/mo (220 - 2,200 lbs.) c. Less than 100 kg/mo (220 lbs.) 2. Transporter (Indicate Mode in boxes 1-5 below) b. For commercial purposes Mode of Transportation 1. Air 2. Rail 3. Treater, Storer, Disposer (at Installation) Note: A permit is required for this activity; see instructions. 4. Hazardous Waste Fuel a. Generator Marketing to Burner b. Other Marketers c. Burner - indicate device(s) - Type of Combustion Device 1. Utility Boiler 2. Industrial Boiler 3. Industrial Furnace 5. Underground Injection Control	1. Off-Specification Used Oil Fuel a. Generator Marketing to Burner b. Other Markerer c. Burner - indicate device(s) - Type of Combustion Device 1. Utility Boiler 2. Industrial Boiler 3. Industrial Furnace 2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification
C. Description of Regulated Wastes (Use additional sheets if necessary)	
Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24) Ignitable 2. Corrosive 3. Reactive 4. EP Toxic (D001) (D002) (D003) (D000) (List specific EPA hazardous waste in Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more 1 2 3 4 7 8 9 10 Other Wastes. (State or other wastes requiring an I.D. number. See instructions.)	number(s) for the EP Toxic contaminant(s))
ertify under penalty of law that I have personally examined and am familiar with dall attached documents, and that based on my Inquiry of those Individual taining the Information, I believe that the submitted Information is true, account there are significant penalties for submitting false information, Including prisonment. Name and Official Title (type or print) Name Technical Direct	uals immediately responsible for curate, and complete. I am aware ding the possibility of fines and

Please print or type with ELLLE type (12 characters per inch) in the unshaded areas only

GSANO 1745 FPA OT

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

Notification of Regulated Waste₁₄ R Activity United States Environmental Protection Agency

Date Received (For Official Use Only)

Di med diales Elivino informati i recome i rigerio	
I. Installation's EPA ID Number (Mark 'X' In the appropriate box)	
A. First Notification B. Subsequent Notification C. Installation (complete item C)	0 7 5 4 4 3
II. Name of Installation (Include company and specific site name)	enter the past and
BROWN PRINTING COMPANY	H aleste in the occurred in .
III. Location of Installation (Physical address not P.O. Box or Route Number)	
Street	
551 MIID ATLANTIC PARKWA	Y
Street (continued)	
	A 40 4 3 (7)
City or Town State ZIP Code	
THORIOFIARE NIJO1810	8 6 -
County Code County Name	
I GLOUCESTER COUNTY	ere like not use take
IV. Installation Mailing Address (See Instructions)	
Street or P.O. Box	
SAME	
City or Town State ZIP Code	
Only or room:	
V. Installation Contact (Person to be contacted regarding waste activities at site)	
Name (last) (first)	
BIORDEN	
Job Title Phone Number (area code and nu	umber)
PLANT TECH. DIR 215-679-	4451
VI. Installation Contact Address (See instructions)	1.5
A. Contact Address Location Mailing B. Street or P.O. Box	It is the second of the second of the
668 GRAVEL PIKE	
City or Town State ZIP Code	taking order of Assault
EAST GREENVILLE PAISO	41-9632
VII. Ownership (See instructions)	11.1 17101312
A. Name of Installation's Legal Owner	AL MARKET CHARACT
GRUNER + JAHR PRINT + P	UBL. ICO
Street, P.O. Box, or Route Number	
	0 X 1 5 4 9
City or Town State ZIP Code	
WASECA MN560	93-0517
Phone Number (area code and number) B. Land Type C. Owner Type D. Change of Own Indicator	ner (Date Changed) Month Day Year
indicator	

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes.	44 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes.	
	. Refer to Instructions.)
A. Hazardous Waste Activity	B. Used Oil Fuel Activities
1. Generator (See Instructions) a. Greater than 1000kg/mo (2,200 lbs.) b. 100 to 1000 kg/mo (220 - 2,200 lbs.) c. Less than 100 kg/mo (220 lbs.) 2. Transporter (Indicate Mode in boxes 1-5 below) b. For commercial purposes Mode of Transportation 1. Air 2. Rail 3. Treater, Storer, Disposer (a Note: A permit is required this activity; see instruction to this activity; see instruction this activity; see instruction to the sactivity; see instruction to this activity; see instruction to the sactivity; see instruction to this activity; see instruction this activity; see instruction to the sactivity; see instruction to this activity; see instruction to see instruction this activity; see instruction to see instruction this activity; see instruction to see instruction this activity; see instructi	a. Generator Marketing to Burner b. Other Markerer c. Burner - indicate device(s) - Type of Combustion Device 1. Utility Boiler 2. Industrial Boiler 3. Industrial Furnace 2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification
A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes correspondent wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24) 1. Ignitable 2. Corrosive 3. Reactive 4. EP Toxic (D001) (D002) (D003) (D000) (List specific EPA hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need 1 2 3 4 7 8 9 10	dous waste number(s) for the EP Toxic contaminant(s))
C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.) 1 2 3 4 C. Certification	5 6
I certify under penalty of law that I have personally examined and am fa and all attached documents, and that based on my Inquiry of thos obtaining the Information, I believe that the submitted Information Is that there are significant penalties for submitting false information imprisonment. Name and Official Title (type or string	se individuals immediately responsible for strue, accurate, and complete. I am aware on, including the possibility of fines and $12/9/92$
The and official time (type of pint	Date Signed Date Signed Date Signed
I. Comments	Allerand
35 HONES WITH 1857	22 :11 AM 11: 22
200	

BROWN PRINTING COMPANY

A GRUNER + IAHR COMPANY

EAST GREENVILLE DIVISION

ROUTE 29 NORTH, RR #2 BOX 2614 • EAST GREENVILLE, PENNSYLVANIA 18041-9632 PHONE 215-679-4451

March 7, 1994

U.S. EPA 26 Federal Plaza New York, New York 10278

Dear Mr. Joel Golumbeak:

This letter is to serve notice that, as of December 31, 1993, we have ceased operation and hazardous waste activity at:

Brown Printing Company 551 Mid Atlantic Parkway Thorofare, NJ 08086 EPA ID Number - NJD981075443

The final waste shipment from the facility was on November 29, 1993. If you have any questions regarding this matter, I can be reached at the above telephone number.

Sincerely,

Bill Booth

Environmental Coordinator

MAR 22 PM 3: 28 U.S. E.P.A.

94 MAR 22 PM 3: 28 U.S. E.P.A.

1NFO. SERV. SECH MAR 15 MH11: 15

HAZ. WASTE COMP. BR.